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**TRANSMITTAL
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Application Number	09/621,715		
	Filing Date	07/24/2000	
	First Named Inventor	Hadi Partovi	
	Art Unit	2645	
	Examiner Name	Olisa Anwah	
Total Number of Pages in This Submission	3	Attorney Docket Number	TEL-Z-005

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Statement Under 37 CFR 3.73(b) <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Request for Refund Remarks	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
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SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm Name	BEVER, HOFFMAN & HARMS, LLP	Customer Number	24488
Signature			
Printed Name	Jeanette S. Harms		
Date	August 31, 2005	Reg. No.	35,537

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